

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 1 OF 1  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Jews for Progress</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00620922	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y 10 / 26 / 2016	

Full Name of Payee <b>Stones' Phones</b>			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 21 / 2016		
Mailing Address 41750 Rancho Las Palmas Dr Ste E-3			Amount 9294.08		
City Rancho Mirage	State CA	Zip Code 92270-5511	Transaction ID : VSGBG9TM469		
Purpose of Expenditure GOTV Phone Calls		Category/ Type 006	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 21 / 2016		
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		45124.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <b>The Office of SPECTRE</b> [MEMO ITEM] *			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 21 / 2016		
Mailing Address 151 Hart Ave			Amount 300.00		
City Doylestown	State PA	Zip Code 18901-5723	Transaction ID : VSGBG9TQ894		
Purpose of Expenditure Production Consulting Services		Category/ Type 006	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y /  /		
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		45124.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	9294.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	9294.08

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Adler, Michael, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2016

Signature